

## **EXHIBIT “C”**

UNITED STATES DISTRICT COURT  
CENTRAL DISTRICT OF CALIFORNIA  
WESTERN DIVISION

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HONORABLE HERNÁN D. VERA, DISTRICT JUDGE PRESIDING

MARK SNOOKAL, )  
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Plaintiff, )  
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 )  
vs. ) No. CV 23-06302-HDV  
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 )  
CHEVRON USA, INC., )  
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 )  
Defendants. )  
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REPORTER'S TRANSCRIPT OF JURY TRIAL PROCEEDINGS

*TRIAL DAY THREE*

LOS ANGELES, CALIFORNIA

THURSDAY, AUGUST 21, 2025

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**I N D E X****PLAINTIFF'S WITNESSES:      DIRECT      CROSS      REDIRECT      RECROSS****DR. ADEYEYE, VICTOR**

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BY OLIVIA FLECHSIG

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BY TRACEY KENNEDY

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**SNOOKEL, MARK**

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BY DOLORES LEAL

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**E X H I B I T S (STIPULATED)**

<u>PLAINTIFF'S</u>	<u>RECEIVED</u>	<u>MARKED</u>
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**E X H I B I T S (STIPULATED)**

(None)

1 listening to you, please make sure to wait until the  
2 question is finished before -- and then pause because  
3 otherwise it will be very hard to hear if there's even a  
4 little bit of overlap. So please make sure to have the  
5 question end and then pause -- there may be an objection  
6 in the courtroom -- so that there is no overlap of  
7 people speaking at the same time. All right. Very  
8 good.

9 Go ahead, Counsel.

10 MS. FLECHSIG: Thank you, Your Honor.

11 **DIRECT EXAMINATION**

12 BY MS. FLECHSIG:

13 Q Thank you for your time being here,  
14 Dr. Adeyeye. I know we met back when we took your  
15 depositions in this case; do you remember?

16 A Yes.

17 Q Okay. And some time has passed, so I wanted to  
18 check. Are you still a contractor for Chevron Nigeria  
19 Limited?

20 A Yes.

21 Q Okay. And you have been providing contract  
22 work for Chevron Nigeria Limited since 2017; is that all  
23 true?

24 A Yes.

25 Q Okay. And back in 2019, you were a contract

1 let me back up.

2 You finished your training as a cardiologist in  
3 2015; is that accurate?

4 A Yes.

5 Q So in 2019, you had been, you know, a fully  
6 fledged cardiologist, if you will, for about four years?

7 A Yes.

8 Q Okay. And you first learned who Mr. Snookal  
9 was, the plaintiff in this case, back in 2019; that's  
10 all true?

11 A Yes.

12 Q Okay. And you found out who he was because one  
13 of the occupational health physicians requested that you  
14 provide an opinion on his -- on his heart health?

15 A Yes.

16 Q Okay. And that was Dr. Asekomeh, the  
17 occupational health physician who made this request to  
18 you; true?

19 A True.

20 Q Okay. And you never spoke to Dr. Asekomeh  
21 about Mr. Snookal in person; true?

22 A True.

23 Q But you did formulate your opinion and then  
24 follow up about it over e-mail; is that fair?

25 A Yes.



1 Q Perfect.

2 Okay. And then just below that, he asked you  
3 to review the three following points. This is what he  
4 is asking you to provide in terms of an opinion; true?

5 MS. FLECHSIG: Sorry. If you can, go back out  
6 so he can see the --

7 BY MS. FLECHSIG:

8 Q So he says, "Kindly review around the following  
9 key points: potential complications in the likelihood of  
10 progression, management of these complications even if  
11 only initial intervention vis-à-vis available care level  
12 in Escravos, and then three possible instructions to  
13 communicate to employee as per preventing  
14 complications."

15 This is the e-mail thread we were -- you were  
16 referring to, where Dr. Asekomeh first told you about  
17 Mr. Snookal and asked you to provide an opinion; right?

18 A Yes.

19 Q Okay. And isn't it true that the only  
20 documents that Dr. Asekomeh provided you along with this  
21 e-mail were three of Mr. Snookal's heart scans?

22 A Only document provided by Dr. Asekomeh was used  
23 to make my opinion on required areas. They required  
24 three items.

25 Q Okay. So let me clarify that a little bit.

1                   So I think that was a yes. But basically,  
2                   Dr. Asekomeh provided you with three scans of  
3                   Mr. Snookal's heart; right?

4           A           Yes. Of Mr. Snookal's heart, yes.

5           Q           And he did not provide you with any other  
6                   documents when he asked you to --

7           A           No, he did not provide.

8           Q           I'm sorry -- when he asked you to provide an  
9                   opinion; is that true?

10          A           True.

11          Q           Okay. And all of the scans that Dr. Asekomeh  
12                   provided you, those were all from one point in time in  
13                   2019; right?

14          A           Again?

15          Q           "It is"?

16          A           Again. Again repeat.

17          Q           Oh, I'm sorry.

18                   All of this -- all of the three scans that  
19                   Dr. Asekomeh sent you with this e-mail were scans from  
20                   2019; true?

21          A           True.

22          Q           Okay. So you were not able to tell that  
23                   Mr. Snookal's dilated aortic root had been stable in  
24                   size for years; true?

25          A           True.

1 your testimony, that it doesn't decrease your risk to  
2 zero, then I agree with you.

3 Would you agree that you did not have the  
4 opportunity to speak with Mr. Snookal's treating  
5 cardiologist prior to making an opinion? Is that fair  
6 to say?

7 A I did not speak with Mr. Snookal's  
8 cardiologist. That is not in the job description.

9 Q Okay. So you said you did not need to.  
10 Did you speak with Mr. Snookal's cardiologist  
11 before making an opinion?

12 A I did not need to speak to Mr. Snookal's  
13 cardiologist before making any opinion because I have  
14 enough evidence to make an informed and valid opinion.

15 Q Okay. Let's get to that.

16 I'm asking you, yes or no, did you speak with  
17 Dr. Khan, Mr. Snookal's treating cardiologist, at any  
18 time?

19 A No.

20 Q Okay. So I want to move to Exhibit 13, page 6.

21 MS. STEPHANIE: Exhibit 13, you said?

22 MS. FLECHSIG: Yes, Exhibit 13, page six,  
23 please. Okay. Okay. Go -- okay.

24 BY MS. FLECHSIG:

25 Q So during your deposition, Dr. Adeyeye, you'll

1 recall I showed you some documents; right?

2 A Yes.

3 Q And this document was Exhibit C to your  
4 deposition; true?

5 MS. FLECHSIG: And you can -- if you could,  
6 kindly scroll forward so he can see the other pages.

7 THE WITNESS: Yes, I see the reports.

8 BY MS. FLECHSIG:

9 Q Okay. So you remember this.

10 You -- you said that this is a cardiology  
11 report for Mr. Snookal's treating cardiologist; right?

12 A This is the report.

13 Q So yes, it is the report?

14 A Yes, it is the report.

15 Q Okay. And you never saw this prior to  
16 formulating an opinion about Mr. Snookal; right?

17 A Not at all.

18 MS. FLECHSIG: Okay. If you could, please go  
19 to Exhibit 13, page 7, I think. I don't know what to  
20 tell you. It's CUSA 823.

21 For some reason, your exhibits are different  
22 than ours.

23 THE COURT: 823?

24 MS. FLECHSIG: 823.

25 THE COURT: So, Counsel, you're going to need

1 MS. FLECHSIG: And you don't have the document  
2 available?

3 MR. MUSSIG: We don't have the produced  
4 document, no. It only goes up to 22.

5 MS. FLECHSIG: This is a document you've  
6 produced in this litigation. Maybe Ms. Steven can plug  
7 in? But I don't know how that will interact with  
8 Dr. Adeyeye.

9 BY MS. FLECHSIG:

10 Q Let's continue while we figure this out.

11 Dr. Adeyeye, is it fair to say that you  
12 testified at your deposition that you only needed the  
13 three scans from 2019 to provide your opinion; is that  
14 fair to say?

15 A True.

16 Q So you did not need any background medical  
17 information on Mr. Snookal in order to formulate your  
18 opinion?

19 A Yes.

20 Q So you just need the scans? You don't need  
21 information about whether he smokes or not?

22 A Yes.

23 Q You don't need information about any  
24 medications he's on?

25 A Yes.

1 Q "Yes," you don't need that information?

2 A I don't need those information for smoking,  
3 drug, to form an informed opinion on the case.

4 Q Okay. You don't need any information about  
5 whether Mr. Snookal exercises or does not exercise?

6 A I do not need that to make an opinion.

7 Q Okay. And you don't need any information about  
8 whether Mr. Snookal even had symptoms or didn't have  
9 symptoms; isn't that true?

10 A I do not.

11 Q Okay. So at the time you made an opinion on  
12 Mr. Snookal, you did not know whether he even had  
13 symptoms or did not have symptoms; is that fair to say?

14 A True.

15 Q Okay. And symptoms associated with a  
16 complication from a dilated aortic group are things like  
17 nausea, vomiting, systemic shock, fainting, things like  
18 that; right?

19 A Correct.

20 Q It's fair to say that those are pretty -- I  
21 don't know -- obvious symptoms; is that -- just is that  
22 true to say?

23 A Those are symptoms of individual with aortic  
24 aneurysm.

25 Q Right. And you did not know whether

1 Mr. Snookal was having any of those symptoms; true?

2 A The opinion requested to not -- or did not  
3 require my knowledge of whatever symptom that person or  
4 not.

5 Q Okay. Your opinion didn't require knowing  
6 whether he was actively having symptoms of a  
7 complication; right?

8 A Yes.

9 Q Interesting. Okay.

10 And so you responded, then, to Dr. Aiwuyo's  
11 e-mail, who had rendered an opinion on Mr. Snookal;  
12 true?

13 A Yes.

14 Q Okay. So in other words, Dr. Asekomeh e-mailed  
15 you, Dr. Aiwuyo gave an opinion, and you then responded  
16 to that e-mail to both of them; fair to say?

17 A I also gave my own opinion; yes.

18 Q And gave your own opinion, yeah.

19 When you gave your opinion to Dr. Asekomeh, you  
20 didn't express any specific percentage of risk with  
21 respect to Mr. Snookal; true?

22 A True.

23 Q Okay. You just agreed with Dr. Aiwuyo's  
24 opinion that Mr. Snookal was, quote, "low risk"?

25 A True.

1 Q And none of you said anything beyond your --  
2 excuse me. As far as the risks of complication, you  
3 weren't more specific than saying he was low risk; true?

4 A Again, repeat.

5 Q In terms of expressing your opinion about  
6 Mr. Snookal's likelihood of a complication in the  
7 future, you weren't more specific than saying he's low  
8 risk; right?

9 A Yes, and that where -- if I can comment here,  
10 let me inform the Court, medical opinion is based on  
11 three major area of medical: the medical history, the  
12 medical examination, and the investigation.

13 Q Mr. Adeyeye, I'm sorry. I know you want to  
14 elaborate. I'm already running low on time. And I  
15 didn't -- I didn't ask about, you know, your analysis of  
16 whose job is whose. But actually, I will get into that.

17 Now that we have Exhibit 47-8, this is the  
18 medical summary I was referring to. Dr. Adeyeye, isn't  
19 it true that this was Exhibit B to your deposition?

20 A This is medical summary by Dr. Asekomeh. I  
21 wasn't privy to this medical summary.

22 Q You weren't privy to this medical summary when  
23 you made your opinion on Mr. Snookal; true?

24 A True, I wasn't privy to it.

25 Q And that's why you didn't know that his



1 cardiologist had said he was asymptomatic, that no  
2 special treatments were needed; true?

3 A True.

4 Q Okay.

5 MS. FLECHSIG: Okay. Exhibit 47 has also been  
6 stipulated to. If we could, please admit that at this  
7 time.

8 THE COURT: All right. Go ahead.

9 (Whereupon, Plaintiff's Exhibit 47 is admitted hereto.)

10 MS. FLECHSIG: Thank you, Your Honor.

11 BY MS. FLECHSIG:

12 Q So you started to say that all you needed was  
13 the scans because Mr. Snookal -- excuse me, strike that.

14 You started to say that all you needed was the  
15 scans; is that fair to say?

16 A All I needed was scans; true.

17 Q And that's because you were just looking at the  
18 size of Mr. Snookal's dilated aortic root on the scans;  
19 right?

20 A That was part of the things I look out for, is  
21 the size of the aneurysm.

22 Q Okay. And you were applying a guideline that  
23 Dr. Aiwuyo sent to the size of Mr. Snookal's dilated  
24 aortic root; right?

25 A Yes, and further details.

1 Q And other than that guideline that Dr. Aiwuyo  
2 sent, you didn't find any other studies saying what  
3 Mr. Snookal's likelihood of an adverse outcome was; is  
4 that fair to say?

5 A There are other complications on that.

6 Q Right. There are other complications.

7 So I was asking, Dr. Adeyeye, you didn't find  
8 any other guidelines, other than what Dr. Aiwuyo sent,  
9 that applied to Mr. Snookal's condition; true?

10 A Not true. (Indiscernible) would Dr. Aiwuyo's  
11 guideline. There other guidelines that give an informed  
12 opinion, not just (indiscernible).

13 Q Okay.

14 A Not just Dr. (inaudible).

15 Q Okay. Let's go to Exhibit 43 again. If we  
16 could, please go to Exhibit 43, page 1. This one is  
17 simple, I promise, and then we can look at it together.

18 Okay. So, Dr. Adeyeye, at the bottom of this  
19 first page, you'll see where you responded to Dr. Aiwuyo  
20 and Dr. Asekomeh; right? Do you see that at the bottom?  
21 I know it's just the top of the e-mail. We probably  
22 have to go to the nest page to see the content.

23 Okay. And you said, "I agree with Dr. Aiwuyo's  
24 submission on above employee, especially the  
25 precautionary measures highlighted, which we can further

1 reiterate to our client."

2 Other than this -- other than this e-mail,  
3 which is up on the screen, you didn't send any other  
4 information about Mr. Snookal; true?

5 A True.

6 Q Okay. And again, you didn't have any other  
7 conversation with Dr. Asekomeh about Mr. Snookal; right?  
8 So this was the only thing you contributed in terms of  
9 your opinion; yeah?

10 A True.

11 Q Okay. So you didn't document any citation to  
12 studies when you expressed an opinion to Dr. Asekomeh;  
13 true?

14 A True.

15 Q Okay. But you did testify, during your  
16 deposition, that you looked at the guideline that  
17 Dr. Aiwuyo linked in the e-mail below.

18 MS. FLECHSIG: If you could get out of there so  
19 we can see what Dr. Adeyeye was responded to below.

20 BY MS. FLECHSIG:

21 Q Okay. So do you see the -- the link in the  
22 center where it says "calgary.ca," this link there?  
23 Dr. Adeyeye, do you see -- do you see what I'm referring  
24 to?

25 A I can see the link.

1 Q You can see the link, okay.

2 And did you look at the link before responding  
3 to the e-mail?

4 A I looked at the link, and also searched -- did  
5 my own research too.

6 Q So you did look at it. And when you looked at  
7 it, you concluded that at Mr. Snookal's size, which was  
8 4.1 to 4.2 centimeters, he falls into the low risk  
9 category; right?

10 A Possibly low category, yes.

11 Q Okay. And, though, you didn't tell this to  
12 Dr. Asekomeh at the time, what you understood from the  
13 guidelines was that Mr. Snookal's risk of any type of  
14 cardiac complication was between 1 and 2 percent; right?  
15 That's what you were thinking?

16 A I wasn't (inaudible).

17 Q I'm sorry, could you repeat that?

18 A I did put -- I did put in low risk, was all I  
19 indicated, not 1 to 2 percent.

20 Q Right. But you testified at your deposition  
21 you're right. You didn't write it in this e-mail. I  
22 agree with you.

23 What I'm asking is you looked at the  
24 guidelines, and the guidelines made you conclude  
25 Mr. Snookal's risk of -- of adverse cardiovascular event

1           So I want to ask you about what you said about  
2           the two types of adverse cardiovascular events you were  
3           concerned about. Dissection and rupture, that's --  
4           that's fair to say; right? Those these were the two  
5           major complications you were concerned with; true?

6           A           True.

7           Q           And the percent percentage between 1 to  
8           2 percent, that's including rupture and dissection  
9           combined; right? So the risk of any serious  
10          complication; true?

11          A           True.

12          Q           Okay. So for all we know, the risk of rupture  
13          could be .001 percent; right? And the remaining would  
14          be dissection; right? We don't know to what extent that  
15          risk is of dissection versus rupture; is that fair to  
16          say?

17          A           They are two hypotheticals.

18          Q           But the guideline 1 to 2 percent, that's a  
19          combined risk of rupture and dissection; right?

20          A           Yes.

21          Q           It's not breaking down dissection versus  
22          rupture; correct? I see you nodding, Dr. Adeyeye.

23          A           Yes.

24          Q           Could you give a verbal answer for the record,  
25          I'm sorry? Is that a "yes"?

1 A Again.

2 Q It didn't break down the risk of rupture versus  
3 dissection in that guideline; right?

4 A Yes, yes.

5 Q Okay. One of your duties at Warri hospital was  
6 to help manage incoming medical evacuation emergencies  
7 from Escravos; is that fair to say?

8 A True.

9 Q Okay. And at your deposition, you shared that  
10 you had helped oversee one medical evacuation in that  
11 past year; fair to say?

12 A True.

13 Q Okay. And that patient was able to get  
14 medically evacuated from Escravos to Warri within about  
15 an hour; right?

16 A True.

17 Q And at Warri, where you're a cardiologist,  
18 you're able to provide non-surgical intervention for  
19 patients; fair to say?

20 A True.

21 Q Is it also fair to say that you've never  
22 treated anyone who has had a dissection?

23 A True.

24 Q And it's also fair to say you've never treated  
25 anyone who has had a rupture; right?

1 A True, the only case that I performed was an  
2 autopsy.

3 Q Right. You did -- you performed an autopsy  
4 while you were in medical school on someone who had died  
5 from a rupture; right?

6 A I didn't perform. I listened to autopsy report  
7 of someone who died at the clinical ground.

8 Q Other than listening to an autopsy report at a  
9 clinical grand round though, you've never treated  
10 someone with a rupture; right?

11 A True.

12 Q Okay. And nothing about the location of  
13 Escravos would increase Mr. Snookal's future risk of  
14 having a complication with his heart; right?

15 A Not true. I can't answer for what I don't know  
16 job description.

17 Q So I'm not asking about the job description,  
18 Dr. Adeyeye. I'm asking about the location of Escravos.  
19 Would anything about the conditions there increase his  
20 likelihood of a complication?

21 A How do I answer that when I don't work in  
22 Escravos to evaluate his risk and the position.

23 MS. FLECHSIG: Your Honor, I'd like to read  
24 from Volume II of Dr. Adeyeye's deposition at page 130,  
25 line 24, through page 31, line 8.

1 MS. FLECHSIG: Yes, Your Honor.

2 THE COURT: Where it begins, "Okay, is there  
3 anything about Escravos."

4 MS. FLECHSIG: Okay.

5 BY MS. FLECHSIG:

6 Q Okay. So just to remind everyone where we were  
7 heading before that interlude, Dr. Adeyeye, you just  
8 testified that you don't know whether Mr. Snookal would  
9 have any -- or excuse me -- you just testified that you  
10 don't know whether Escravos would or would not increase  
11 Mr. Snookal's risk of a complication there; right.

12 A Correct.

13 Q Because you've never -- you've never personally  
14 been to Escravos; right?

15 A True.

16 MS. FLECHSIG: Okay. Now I'll begin reading  
17 from line -- excuse me -- page 130, line 14.

18 "Question, Okay. Is there anything about  
19 Escravos, the location, the medical facilities that are  
20 available or things that are not available there, is  
21 there anything about Escravos that would increase the  
22 likelihood of a rupture occurring?

23 "Answer, Is there anything in Escravos that  
24 would increase the likelihood or that would affect or  
25 impact on the emergency response? Please, which one are



1 you asking?

2 "Question, Exactly. I'm asking about the first  
3 one. So is there anything that would increase the  
4 likelihood that someone's dilated aortic root ruptures?"

5 "Answer, Anything in Escravos that would  
6 increase the risk. Location does not increase your  
7 risk. If I stayed in California, I stayed in New York,  
8 I stayed in Alabama, you're risk is the same. It is not  
9 the environment that increases the risk. Either you are  
10 in Escravos, in Lagos, or in Warri, that singular  
11 location does not increase the risk."

12 MS. FLECHSIG: That's not -- keep going?

13 THE COURT: No, please continue through 14.

14 MS. FLECHSIG: Yes, Your Honor.

15 MS. FLECHSIG: The appropriate question here  
16 will have been: "Are there activities in Escravos? Are  
17 there activities or things that could impact on the  
18 survival of an individual who ruptures in any location?"

19 "Now, more specifically, in Escravos? That's a  
20 question that's way -- that's all. It's been so  
21 interesting for me to answer. Please."

22 BY MS. FLECHSIG:

23 Q Dr. Adeyeye, in that response, you said the  
24 location itself doesn't increase your risk of rupture;  
25 right?

1 A True.

2 Q But job duties potentially could increase your  
3 risk of a rupture or any other complication; fair to  
4 say?

5 A True.

6 Q Before giving an opinion on Mr. Snookal, you  
7 didn't know what his job duties were; correct?

8 A True.

9 Q Dr. Asekomeh never referenced to you what he  
10 would or would not be doing in Escravos; fair to say?

11 A Yes.

12 Q And you testified that that's Dr. Asekomeh's  
13 job to decide whether Mr. Snookal is fit for duty; true?

14 A True.

15 Q Okay. Thank you, Dr. Adeyeye. Those are all  
16 of my questions for now.

17 A You're welcome.

18 THE COURT: Don't go away yet, Dr. Adeyeye.  
19 Attorney for Chevron is now going to ask you some  
20 questions.

21 THE WITNESS: Okay, sir.

22 **CROSS-EXAMINATION**

23 BY MS. KENNEDY:

24 Q Good afternoon, Dr. Adeyeye. This is Tracy  
25 Kennedy, again, how are you this afternoon?

1 Q Sorry. Dr. Adeyeye, can you give those five  
2 names again slower for the court reporter?

3 A Dr. Pitan --

4 THE COURT: Dr. Pitan.

5 MS. KENNEDY: Dr. Pitan.

6 THE WITNESS: -- Dr. Asekomeh --

7 BY MS. KENNEDY:

8 Q Dr. Asekomeh?

9 A Yes.

10 Dr. Aiwuyo.

11 Q Dr. Aiwuyo.

12 A Dr. Akintunde.

13 Q Dr. Akintunde.

14 A And Dr. Adeyeye.

15 Q I'm sorry. Dr. who?

16 A Myself.

17 Q Oh, Dr. Adeyeye. Okay. Thank you.

18 MS. KENNEDY: Your Honor, I have no more  
19 questions.

20 THE COURT: Very good. Any re-cross?

21 MS. FLECHSIG: Very quickly, Your Honor.

22 **REDIRECT EXAMINATION**

23 BY MS. FLECHSIG:

24 Q Dr. Adeyeye, you just testified that only a  
25 cardiothoracic surgeon would be able to fix a rupture or

1 a dissection if that occurred; true?

2 A True.

3 Q And you would agree that you would only need  
4 the services of a cardiothoracic surgeon if there was a  
5 complication; right?

6 A True.

7 Q And to your mind, the risk of that ever  
8 happening was low; right?

9 MS. KENNEDY: Objection. That's beyond the  
10 scope.

11 THE COURT: Overruled.

12 BY MS. FLECHSIG:

13 Q Dr. Adeyeye, you can answer that one.

14 A Repeat, please.

15 Q Yeah. To your mind, the risk of a complication  
16 ever happening and requiring the services of a  
17 cardiothoracic surgeon was low; true?

18 A True, (indiscernible).

19 Q In fact, it was only 1 to 2 percent, based on  
20 the guidelines and Mr. Snookal's scans, in your opinion?

21 A True, true.

22 Q Okay. And because you didn't have any  
23 information available to you at the time, other than the  
24 three scans you looked at, no one ever told you that  
25 Mr. Snookal's cardiologist had already determined

1 Mr. Snookal did not need any special treatments; right?

2 MS. KENNEDY: Objection. That's beyond the  
3 scope.

4 THE COURT: Sustained.

5 And you've gone over this, Counsel.

6 MS. FLECHSIG: Yes, Your Honor.

7 BY MS. FLECHSIG:

8 Q I want to ask you about your recommendation to  
9 give -- excuse me, your recommendation with respect to  
10 Mr. Snookal's choice of medications.

11 MS. FLECHSIG: I just saw Defense counsel  
12 display it as Exhibit 39, page 2. So I'm confident that  
13 will get us to the right place. If you could, please  
14 pull that up.

15 BY MS. FLECHSIG:

16 Q Okay. So this, again, is the one e-mail where  
17 you expressed any opinion about Mr. Snookal, true, at  
18 the top here?

19 A True.

20 Q Okay. And you say, "I have a little concern  
21 about his choice of anti-hypertensives, losartan and  
22 amlodipine."

23 You expressed that opinion without having a  
24 medical report on Mr. Snookal; true?

25 A True.

1 Q Without knowing whether or not he was even  
2 having these extreme symptoms; true?

3 A True.

4 MS. FLECHSIG: Thank you. I have no further  
5 questions, Your Honor.

6 Dr. Adeyeye, thank you for your time.

7 THE COURT: Dr. Adeyeye, your examination is  
8 finished. So thank you for your time. We appreciate  
9 it. Have a good day, sir.

10 THE WITNESS: Thank you, sir.

11 THE COURT: All right. Thank you.

12 All right. Why don't we take a five-minute  
13 stretch break here. Since we are pressed for time here,  
14 we want to make the most out of our testimony today.  
15 I'm not going to take a full break. Why don't we just  
16 get up, stretch. You can check your messages if you  
17 need to. But let's make sure we have our next witness  
18 and resume in five minutes. I'll stay here, as well.

19 (Recess.)

20 (Whereupon, the following was held in the  
21 presence of the jury:)

22 THE COURT: All right. Are we ready?

23 MS. LEAL: Yes, Your Honor.

24 THE COURT: All right. So let's continue.  
25 Let's go back on the record. Who does plaintiff call

1 one more, University of North Dakota.

2 Q So did you end up getting a college degree?

3 A Did not.

4 Q Okay. And do you believe the fact that you  
5 don't have a college degree has hindered your ability  
6 to -- to move up in your various employments?

7 A Yes, it has definitely hindered my progression  
8 throughout my entire career.

9 Q Okay. Despite the fact that you don't have a  
10 college degree, do you have any certificates or  
11 specialized training?

12 A I do.

13 Q What is that?

14 A I have a few. I have Microsoft administrator,  
15 although it's out of date at this point. I have a SAFe  
16 5E agile project owner certificate. I have a Lean Six  
17 Sigma Green Belt, and I have an Instrumentation Society  
18 of America instrumentation certificate.

19 Q And what is a SAFe project owner?

20 A Agile is a methodology of project management  
21 for computer software, I guess is the easiest way to say  
22 it. Project owner is the interface between the end-user  
23 and the programming team -- or the data scientists,  
24 mostly in my case. It's kind of a translation role that  
25 has to understand both sides; write what the refineries

1 wanted to compete with them better, so they studied what  
2 they did, and they came up with this lean methodology.

3 It's gone by different names over time, but  
4 it's currently called Lean Six Sigma. So it's basically  
5 a way of doing QA/QC, of identifying issues, finding out  
6 the root cause of those issues and then eliminating  
7 them, is the easiest way to say it.

8 Q Okay. Thank you.

9 You also said that you had a certificate or  
10 specialized training in ISA instrumentation. What is  
11 that, and when did you receive that?

12 A That, I received in 2004, so before my  
13 employment with Chevron.

14 Q Okay. And what -- what is that specialization?

15 A Um.

16 Q That certificate, I apologize?

17 A It's okay. It's a little hard to explain. Let  
18 me -- let me take a second to think about how best to  
19 say it. So you know, like, on your car, how you have  
20 gages maybe that tell you how much fuel you have or how  
21 hot your radiator is or how hot your oil is, depending  
22 on what kind of car you have, that's all measured with  
23 instrumentation. And so some of it is controlled with  
24 instrumentation as well. Like, there might be valves or  
25 solenoids that click on and off to regulate and control



1 all of that. It's a specialty in maintaining and  
2 troubleshooting that kind of equipment.

3 Q Great. Thank you.

4 And I think the last one was Microsoft admin,  
5 but you said that it's out of date. So I'm not even  
6 going to ask you about that, and I think most people  
7 probably know what Microsoft is.

8 A Yes.

9 Q So let's talk about your work experience. I  
10 know you worked at a lot of different places. So just  
11 tell us about what job you consider the most memorable.

12 A That would be my first job, actually. I had it  
13 between -- I started in my sophomore year of high  
14 school, worked the summer there. It was a very small  
15 company. We made analyzer systems, which are  
16 specialized -- taking laboratory analyzers and putting  
17 them in the field, so maybe at a refinery or a chemical  
18 plant or measuring emissions out of stacks; right. So  
19 if you drive by and you see stacks, that's all monitored  
20 by the South Coast Air Quality Management District in  
21 this area.

22 Q Can you tell us what you mean by "stacks"? I  
23 didn't know what stacks were when you told me "stacks."

24 A So a stack is -- we call it a stack, but it's  
25 basically what you think of as a smoke stack; right. So

1 it's the outlet of some kind of combustion; right.  
2 You're either burning trash, like they do out on  
3 Long Beach at the trash burning power plant, or you  
4 might be burning natural gas. And you may be burning  
5 something like refinery fuel gas. It might be some kind  
6 of an incinerator, which is burning some kind of gas  
7 that they're not allowed to release into the  
8 environment.

9 For instance, when they sterilize medical  
10 equipment, they have to burn the ethylene oxide, I  
11 believe it is, because you're not allowed to release  
12 that into the environment. So all of that would come  
13 out through the stack, and then we would measure what  
14 came out to make sure you were in compliance.

15 Q So why was that job so memorable?

16 A Right. So it wasn't just because it was a  
17 summer high school job, but I actually went back to that  
18 job, that same company, in 1991, so about two years  
19 later-ish. And then I continued there for another seven  
20 years. And I would say it is not only the way that I  
21 got into a highly specialized field, which is what has  
22 allowed me to progress as far as I have without a  
23 degree, but it also, through the mentorship there,  
24 allowed me to move from, you know, basically a delivery  
25 driver, which is what I started as, into a project

1 manager and a project engineer.

2 And then I did quite a bit of installation work  
3 of the -- you know, we built shelters somewhere between  
4 8 by 10, and I think the biggest one we ever built was  
5 about 15 by 30. So installing those in different  
6 locations around the world.

7 Q And so did you have to travel around the world,  
8 then, to install these?

9 A I did.

10 Q Where did you travel to?

11 A The first place I traveled to -- I was -- I was  
12 about 20 years old. I remember because I had to use  
13 traveler's checks because they wouldn't give me a credit  
14 card. This was back in the '90s. And that was Trinidad  
15 and Tobago, and I stayed there for about a year. Then I  
16 went to -- these may be a little bit out of order. It  
17 was a while ago. But the other countries I went to --

18 Q Doesn't have to be in -- doesn't have to be in  
19 order, I'm sorry.

20 A Yeah, okay.

21 Q Where in the world were you traveling to?

22 A Malaysia, Trinidad. I spent a long time in  
23 Qatar. I did two different locations in Saudi Arabia,  
24 all totaling roughly four or five years all added up  
25 together. It was a very long continuous stretch; right.

1 So for the most part, that is what I did towards the end  
2 of my employment with them.

3 So I would go for about three months and then  
4 come home for about three weeks, and then go back for  
5 another three months. I might have some downtime at the  
6 end of one job before the next job is ready. I didn't  
7 get a lot of downtime between those jobs.

8 Q And the countries where you were actually  
9 living for these different stretches that you just  
10 described, what countries were those?

11 A Qatar, Saudi Arabia, Malaysia, Trinidad and  
12 Tobago, and Thailand.

13 Q Okay. And what were the living conditions  
14 in -- let's just say in Qatar?

15 A Qatar was what they call a green field  
16 installation, which is basically brand-new plant, but it  
17 was not only a brand-new plant; it was actually a  
18 brand-new area of development. So we were building the  
19 first three plants there, so there was no  
20 infrastructure, aside from roads, when we first started.  
21 So I lived in a compound, which is basically just a  
22 fenced area in the desert. I had an 8-by-10-ish room  
23 and a tiny little bathroom.

24 Q And what about the living conditions in Saudi  
25 Arabia? Were they any different, or were they about the

1 same?

2 A They were a little bit varied. So on one  
3 assignment, I was in a Holiday Inn, but not like a  
4 Holiday Inn in America. And then the other one, I was  
5 in a compound living in -- with the Saudis. And that  
6 particular one, they gave me a stipend for food, and  
7 they gave me a car. So I actually drove around and, you  
8 know, shopped for groceries and that kind of thing.

9 Q Okay. All right. So why don't we move on now  
10 to your employment with Chevron.

11 A Okay.

12 Q When were you hired at Chevron?

13 A 2009.

14 Q And why did you apply at Chevron?

15 A Um, I was doing a lot of contracting work in  
16 2007 and 2008 and ended up with a lot of travel, and my  
17 son was very young. He has some special needs, so it  
18 was difficult both to be away and to put a burden on my  
19 wife. And so I was looking for a stable job that I  
20 wouldn't have to travel much at that time.

21 And, you know, I had worked with -- like I  
22 said, I was in a specialized industry, so I had worked  
23 with a lot of different people across various oil  
24 companies, power plants. We have annual conferences  
25 that I would attend, so I would meet all the different

1 people from different companies and different places.

2 And, you know, companies get reputations.

3 So Chevron seemed to match with both my  
4 philosophy and the kind of work that they did. So that  
5 was not the only company that I looked for and applied  
6 to, but when an opportunity came up at Chevron that  
7 was -- I should say degree no longer required, I jumped  
8 on that.

9 Q You just said that Chevron's philosophy aligned  
10 with your philosophy. What was that philosophy that you  
11 were referring to?

12 A So Chevron has -- they were quite  
13 forward-thinking; right? They had a lot of inclusion  
14 initiatives before that became really a thing. They  
15 recognized things, like benefits for partners sometime  
16 in the early 2000s; right? So that was encouraging.  
17 It's not very typical in the oil industry at that time.  
18 The other thing is the management philosophy, which was  
19 by collaboration. It was really more about what you  
20 knew and what you could do than -- than your  
21 background -- or at least so it seemed.

22 Q And you just mentioned that another reason you  
23 joined Chevron at the time was because you wanted to  
24 travel less and you had a special needs child. Is Ben a  
25 special needs child?

1 A He is.

2 Q You can tell us about that.

3 A Um, it's sometimes referred to as  
4 twice-exceptional, which I don't really like the  
5 language much, but that is what it's called. It means  
6 high IQ but also fairly severe learning disabilities and  
7 some mental health issues. He's been in therapy, I  
8 think, since he's, like, four, maybe. And so we had to  
9 pull him out of school also when he was in second grade,  
10 even though that was a nonspecialized private school, it  
11 was still kind of overwhelming for him. And so he'd  
12 been home-schooled until about 2019.

13 Q When you started working at Chevron in 2009, do  
14 you know if you had a disability?

15 A I wasn't aware of any disability that I had.

16 Q At some point, you learned that you have a  
17 disability?

18 A That is correct.

19 Q And when did that occur?

20 A That was 2014.

21 Q And who diagnosed you?

22 A Dr. Khan, ultimately.

23 Q Was Dr. Khan your cardiologist at the time?

24 A Yes, sorry. My cardiologist, Dr. Khan.

25 Q That's fine. Don't worry.

1           So when -- he diagnosed you with dilated aortic  
2 root; correct?

3           A           Correct.

4           Q           When he diagnosed you with that, what was your  
5 reaction? I mean, this is a new -- a new -- new news,  
6 if you will?

7           A           Yeah, I mean, I can't say that I was crazy  
8 about it. But he and I talked for quite some time.  
9 When he -- you know, when I first got the diagnosis, and  
10 he gave me a lot of information. I ended up -- well,  
11 just right at the time, he explained to me that it  
12 wasn't really something to panic about.

13                   They do what's called watchful waiting until it  
14 gets to a size that they feel that it needs to be  
15 operated on. He told me that could be, you know, ten  
16 years from now or never and to just, you know, do what  
17 you're supposed to: follow the directions, take the  
18 medicine that you're supposed to, get your annual  
19 monitoring, and -- you know, we'll just take it a day --  
20 well, not a day at a time, but kind of a year at a time,  
21 which is the only time that I saw him.

22           Q           Okay. And did you talk to Dr. Khan about your  
23 job?

24           A           I did. He did ask me what I was doing for  
25 employment. I told him that I was --



1 MS. KENNEDY: Objection; hearsay.

2 THE COURT: Sustained.

3 BY MS. LEAL:

4 Q Did Dr. Khan have an understanding of you did  
5 for employment, for work?

6 A He did. I believe he alluded to it earlier in  
7 his testimony where I climbed ladders and that I was in  
8 the field of fair part of the time and that I also did  
9 office work as an engineer.

10 Q Okay.

11 MS. LEAL: Your Honor, I'd like to display some  
12 documents and photos that are not marked as exhibits.  
13 May I show them to the Court?

14 THE COURT: Okay. As demonstratives?

15 MS. LEAL: Yes, demonstratives.

16 MS. KENNEDY: Your Honor, may I see them as  
17 well?

18 THE COURT: Of course.

19 MS. LEAL: Yes, of course. Let me get the copy  
20 out.

21 May I approach?

22 THE COURT: Yes, please.

23 Let's just have a sidebar so we can look at  
24 them together.

25 (Sidebar.)

1 seen these before.

2 THE COURT: I'm going to let you ask him about  
3 it but only as demonstrative. I'm not going to let them  
4 in as evidence.

5 MS. LEAL: That's fine, Your Honor.

6 And again, the reason those were brought up, we  
7 looked for them last night, is because they started  
8 asking Mr. Malpica questions about how many stairs, how  
9 many flights.

10 THE COURT: Yeah, okay.

11 MS. LEAL: Thank you.

12 (Sidebar concluded.)

13 BY MS. LEAL:

14 Q We're going to show you a picture, Mr. Snookal.  
15 It's going to be on the screens in a moment.

16 Can you tell us what this is?

17 A So this is a stack or a smoke stack on the  
18 delayed coking unit at the El Segundo refinery.

19 Q Did you take this picture?

20 A I did, as part of my engineering duties for  
21 them. We were doing a project on this particular stack.  
22 And that top platform there at the way tippy-top is  
23 where the analytical equipment for continuous emissions  
24 monitoring or the environmental analyzers that I was  
25 talking about before -- that's where that sits. The

1 stack is approximately 180 to 200 feet tall to that  
2 platform.

3 And as you can see, it has what we would call  
4 caged ladders that are offset for safety, so that if you  
5 slip and fall, you only fall, in this case, about  
6 30 feet. The cage is also quite open to try to catch  
7 you on your way down so that you don't fall all way.  
8 I regularly climbed these for the majority of my time at  
9 Chevron, both pre and post disability. When I was doing  
10 the projects for these, there's 26 of these stacks in  
11 the refinery, and I regularly climbed all of them to  
12 either take measurements or assist with maintaining that  
13 equipment that's all the way up at the top.

14 Q You said they were about 180 to 200 feet. Can  
15 you tell us how many stories, like in a building?

16 A So yeah, typically a story -- not in this  
17 building, obviously. But generally, when you refer to a  
18 story, you're either talking 10 or 12 feet, so that's  
19 approximately, what, 18 -- you know, maybe as little as  
20 15 -- 15 to 20 stories tall, give or take.

21 Q And you just testified that you regularly  
22 climbed. What is it that you were climbing? Can you --  
23 can you describe?

24 A Those ladders. So if you -- if you see how  
25 they're kind of staggered moving up, there's -- kind of

1 look like cages. If you really look at it, you can see  
2 rungs in there. And then there's, like, individual  
3 platforms, so you can take a rest, if you want, but also  
4 to catch you if you fall, like I said.

5 In older refineries, they're actually straight  
6 ladders. They would go all the way up, which is not  
7 great because then you don't really have anywhere to  
8 rest, but you still got to climb it. So...

9 Q Now, when you were talking with Dr. Khan, did  
10 you describe your work duties to Dr. Khan after he  
11 diagnosed you with the dilated aortic root?

12 A I did. And this is what I told him that I did.

13 Q Okay. And did he express any concerns to you  
14 about the fact that you would be going up and down  
15 these -- these stories or these feet?

16 A No, he just told me, you know, be careful,  
17 basically. I think that was just a general comment.

18 Q Okay. We have another picture to show you,  
19 second one with the orange.

20 What is this picture, Mr. Snookal?

21 A So this is a similar stack. I took this  
22 picture. This is actually a picture of the work that we  
23 were doing on the stacks. We were putting in a new  
24 tubing bundle, which is what takes some of the gases  
25 from the top down to the bottom where they can be

1 analyzed. So it's -- some get analyzed at the top; some  
2 get analyzed at the bottom.

3 That's that bundle next to the orange basket  
4 that the two people are in. They'll string that down  
5 the side of the stack. This picture was taken from a  
6 stack right next to it that's just as tall. They happen  
7 to have two heaters right next to each other, so it gave  
8 me a nice vantage point for taking some demonstrative  
9 photos to include in my construction packages in the --  
10 excuse me -- in the future.

11 Q Thank you.

12 And one more picture -- well, before we get to  
13 the other picture, in this one, did you -- you said you  
14 were high enough, obviously, in order to be able to take  
15 a picture of the two men in that orange. What is that  
16 orange thing called?

17 A It's called a man lift. Sometimes -- a lot of  
18 time people call it by the manufacturer, like a JLG or a  
19 Skylift, you know. So people -- people use a lot of  
20 different names for it, but it's official name is a man  
21 lift.

22 Q Okay. So you were high enough to be able to  
23 see the man lift across. How did you get to that level  
24 to be able to take that picture?

25 A It's just like the stack in the picture, the

1 one that I climbed up. It has also a series of ladders  
2 just like the other picture. Here, you can see the  
3 platforms a little bit better and maybe the cages on the  
4 ladders a little bit more clearly because it's a side  
5 shot.

6 Q And do you remember when, approximately, you  
7 took that picture?

8 A This one should be around 2016.

9 Q Okay. And one more picture. Did you take this  
10 picture as well?

11 A I did. This was for a non-personnel-involved  
12 incident where we dropped some equipment off of the top  
13 of it on accident. And so this was a photo taken for  
14 the investigation and safety write-up, basically.

15 You can see a person standing there. He was  
16 actually showing me where it happened. I wasn't in  
17 attendance when it happened. And so that's why the  
18 picture is a little weird, you know, shot at the ground,  
19 because that's what happened. It dropped from where I'm  
20 standing. Was actually one of those tubing bundles, so  
21 it coiled up about 300 feet of tubing on the ground  
22 there.

23 Q And how high were you when you took this  
24 picture?

25 A This one, I think, was one of the taller ones.

1 It's around 200 feet. It might even be a little but  
2 taller than that.

3 Q So 200 feet would be around 20 stories, then?

4 A Correct.

5 Q Okay.

6 A This was actually one of the ones we had to  
7 climb more often. It is on a very difficult process.  
8 This particular unit in the -- in the picture takes H<sub>2</sub>S,  
9 which is like rotten eggs -- like the rotten egg gas, I  
10 think is what most people call it or are familiar with  
11 it as. It takes almost pure H<sub>2</sub>S and turns it into pure  
12 sulfur that we then sell or incinerate.

13 Q Okay. And what year was it that you took this  
14 picture?

15 A This was also around 2016, I think, later in  
16 the year.

17 Q Okay. All right. Now, when you were first  
18 hired at Chevron, what was your first job?

19 A My first job was analyzer engineer, which was  
20 basically someone on the other side of the same business  
21 that my first job was on; right? So we would sell to  
22 analyzer engineers and to facilities. Now I am buying  
23 analyzer systems from vendors as well as, because of my  
24 background specifically, assisting our maintenance  
25 department maintain those analyzers. So that was a

1 little bit outside of what the other engineers did,  
2 necessarily.

3 Q And how long were you an analyzer engineer?

4 A For two years.

5 Q And at the time, what was your pay scale grade?

6 A I was a 21.

7 Q And what was your next position with Chevron?

8 A I was selected due to my technical --  
9 demonstrated technical ability, like I said, helping out  
10 in the field, helping the maintenance department. Upper  
11 management was having some issues with the current  
12 supervisor -- long-time supervisor of that department --

13 MS. KENNEDY: Objection --

14 THE COURT: Wait, wait. I'm sorry?

15 MS. KENNEDY: Objection; nonresponsive.

16 THE COURT: Sustained.

17 Sir, the question was just: "What was your  
18 next position with Chevron?"

19 THE WITNESS: Sorry. Analyzer maintenance  
20 supervisor.

21 BY MS. LEAL:

22 Q And what is an analyzer maintenance supervisor,  
23 in layperson's terms?

24 A Someone that supervises the technicians that  
25 take care of all of those analyzers, like, so those



1 stacks, the other lab equipment. We had about 360  
2 pieces of equipment that had routine maintenance to be  
3 done on them. And so I supervised the people that did  
4 those -- that routine maintenance. I also acted as a  
5 mentor and a technical expert in that capacity.

6 Q And approximately how many persons did you  
7 supervise at that time?

8 A It fluctuated a little bit, but it was usually  
9 around 18.

10 Q And how long were you in this analyzer  
11 maintenance supervisor position?

12 A Just about two years.

13 Q And what was your next job at Chevron?

14 A I was the analyzer reliability champion.

15 Q So are we talking now about around 2013?

16 A Yes, that sounds right.

17 Q Okay. So you're an analyzer -- what was your  
18 title again? I'm sorry?

19 A Analyzer reliability champion.

20 Q Right.

21 And what is an analyzer reliability champion?

22 A The maintenance of the analyzers have something  
23 called a PM schedule, so like on your car, right,  
24 preventive maintenance. Our particular refinery didn't  
25 have a lot of those PMs written. A lot of it was just

1 done by memory. The technicians would try to keep track  
2 of it and just kind of remember when they were supposed  
3 to do those PMs.

4 So the analyzer reliability champion was a  
5 special project to document, develop, and implement a  
6 routine maintenance, preventive maintenance -- or a  
7 routine maintenance and preventative maintenance plan to  
8 increase the reliability of that equipment; right? So  
9 it used to break down a lot, and it stopped by the end  
10 of the, you know, special project. We dramatically  
11 increased the reliability.

12 Q So how long were you in this position, the  
13 reliability --

14 A It think it was about three years.

15 Q -- analyzer champion?

16 So now, we're talking about, what, 2016?

17 A Yes.

18 Q Okay. So what was your next job in 2016?

19 THE COURT: Could you, please, Counsel, just be  
20 mindful of your total time?

21 MS. LEAL: Yes, Your Honor.

22 THE WITNESS: It was instrument electrical  
23 analyzer reliability team lead, was also called IEAR  
24 team lead because it was too long to say.

25 BY MS. LEAL:

1 Q Okay. And how long were you in the IEAR  
2 position?

3 A I was in that position until November of 2019,  
4 and then I was in that position again from 2021 --  
5 really November 2020 to the time that I ceased working  
6 for Chevron.

7 Q Okay. And this IEAR, it is a team lead.  
8 Did you supervise employees, as well, because  
9 you were a team lead?

10 A Yes, I did. This was a team of -- a mixed team  
11 of reliability analysts, engineers, and various  
12 specialists in the fields that, you know, my group  
13 covered.

14 Q And who were your supervisors during the time  
15 that you were an IEAR team lead?

16 A Kit Deaver (phonetic) for the vast majority  
17 and then Austin Ruppert for several months until I  
18 wasn't an IEAR lead, and then he actually departed the  
19 company. So I technically had another supervisor at the  
20 very end, Greg Curtin.

21 Q Okay. So you've identified four different  
22 positions that you held with Chevron, and I heard the  
23 word analyzer with each job title.

24 What does it mean to be an analyzer? Is that a  
25 specialized field?

1 A It is a very specialized field. There are not  
2 very many people that -- that have that specialty with  
3 or without degrees, which is why Chevron had to  
4 ultimately open it up in 2009 to non-degreed people. I  
5 think they'd been looking for almost two years to fill  
6 that role.

7 During my time there, after -- you know,  
8 starting fairly early on, they recognized that I had a  
9 broad background having worked both as a technician, as  
10 an engineer, and a field installation specialist. So  
11 they made me an SME, which is a subject matter expert.  
12 Over my time there, in addition to my regular job  
13 duties, I presented at the internal company conferences  
14 and symposia. I was often the keynote speaker in that.  
15 I did research and development on analyzer technologies  
16 in cooperation with vendors. I testified ahead -- in  
17 front of the South Coast Air Quality Management District  
18 on three occasions as the company's technical  
19 representative. I -- I mean, I did a lot, but...

20 Q You were clearly a specialist in analyzers,  
21 whatever "analyzers" mean?

22 A Yes. They also used me for client screening.  
23 They flew me to other facilities sometimes to do trouble  
24 shooting. So like a lot of different things; right?  
25 Yeah.

1 Q Okay. Now, during your entire employment with  
2 Chevron, had you ever asked for any form of  
3 accommodation because of your dilated aortic root?

4 A I had not.

5 Q What about your employment since Chevron? Have  
6 you asked those employers for any type of accomodation  
7 because of your dilated aortic root?

8 A I have not.

9 Q And during the time that you were employed with  
10 Chevron, I assume you received performance evaluations?

11 A I did.

12 Q And typically, how often did you get them?

13 A We were supposed to get them every six months.  
14 They did okay at that. But I definitely got one every  
15 year, for sure.

16 Q And typically, how were your performance  
17 evaluations rated?

18 A They had a numerical system. So I was a 2 or a  
19 2-plus, which is high to mid.

20 Q Were you ever placed on any sort of performance  
21 improvement plan?

22 A No.

23 Q So by this time, your last position, IEAR team  
24 lead, you'd been with Chevron now for ten years, I  
25 think.

1 How did you feel about working for Chevron?

2 A Um, I would say that from when I started there,  
3 I was pretty happy, and I, you know, felt like I made a  
4 good choice, like I'd gotten what I was looking for.  
5 Ten years in, I was very happy. I had progressed. Even  
6 though it is a very engineer-centric company, I'd still  
7 managed to progress, not only in my expertise but in my  
8 recognition across all of Downstream, which is a section  
9 of Chevron. And, you know, it kind of felt like my  
10 first job again, right, where I would like to stay there  
11 forever. I didn't have any intention of leaving Chevron  
12 despite my three-hour commute every day. Yeah, it -- it  
13 was great.

14 Q Okay. And at some point, you learned about the  
15 reliability engineering manager position located in  
16 Escravos; correct?

17 A Correct.

18 Q And how did you learn about that vacancy?

19 A Um, as part of my regular duty -- you know, not  
20 duties. But one of the things that I did regularly was  
21 look at the internal job board for my, you know, next  
22 career progression but also for my direct reports,  
23 several of who I helped get jobs outside of El Segundo  
24 in different locations that were promotions.

25 And at the time, I happened to be looking to

1 increase my income due to my son. I was looking to send  
2 him to a special school. So I broadened my research a  
3 little bit, I would say, you know, looking for  
4 international opportunities because I know that they pay  
5 incentive pay based on hardship, you know, hot weather,  
6 location, low medical resources, that kind of thing,  
7 right. That's -- that's how I found it.

8 Q Okay. So does Chevron -- or did Chevron at the  
9 time have some sort of online location where you could  
10 see these jobs?

11 A Yeah. Sorry. So they have an online job board  
12 internally.

13 Q Okay?

14 A And I had set up, like, filters that would send  
15 me e-mails daily that would tell me, you know, this job  
16 is open, that job is open.

17 Q When you learned about the reliability  
18 engineering manager position being open in Escravos, did  
19 you know anything about Escravos?

20 A I had some familiarity with Escravos. One of  
21 the people that reported to me had come from Angola as a  
22 must move, and he was trying to get into Escravos but  
23 was unsuccessful. So he had talked to many of the other  
24 expats. They tend to rotate around between the  
25 facilities, and so he knew a lot of people that had

1 worked in Escravos. I also knew several people  
2 personally that had either recently gone to Escravos or  
3 had been there for a few years, as well as I had sent  
4 one of my own direct reports to Escravos about a year  
5 earlier.

6 Q So based upon what you learned, how would you  
7 describe Escravos?

8 A I mean, the way I thought of it was kind of  
9 like a jungle version of Qatar, not a great place to  
10 live, but you know, it paid really well. Yeah.

11 Q And at the time you decided that you were going  
12 to apply for the REM position in Escravos, were you  
13 aware that there was no hospital in Escravos?

14 A I was.

15 Q And were you concerned about applying for a job  
16 in Escravos considering that you had a dilated aortic  
17 root and there was no hospital there?

18 A I had actually asked Dr. Khan before I  
19 considered applying if he had any concern with me  
20 working. And I --

21 MS. KENNEDY: Objection; calls for hearsay.

22 THE COURT: Sustained.

23 MS. LEAL: It's state of mind, Your Honor.

24 MS. KENNEDY: Sorry. Move to strike.

25 THE COURT: He -- there's been no answer about



1 A So my supervisor was Kit Deaver, and he gave me  
2 approval. I also contacted my PDR, which also happened  
3 to be the general manager and director of the Escravos  
4 gas-to-liquid plant, Greg Gabel, who I had worked with  
5 in El Segundo already.

6 Q And why did you want to work in Escravos -- or  
7 "Escravos"?

8 A Um, it's twofold, really. The El Segundo  
9 version of this job is degree-required. The Escravos  
10 version of this job is not degree-required. That is  
11 only part of it, though. I would say even more than  
12 that, because there would have been other ways to  
13 progress, as -- I know we haven't mentioned it. But it  
14 is a pay grade 23, so it would have been a pay grade  
15 promotion.

16 But also, earlier that year, my son no longer  
17 wanted to be homeschooled, and we were very concerned  
18 about sending him to a public school just based on his  
19 therapy. So we -- the therapist suggested that we hire  
20 an educational consultant, which we did. That  
21 educational consultant advised us not to send him to  
22 public school even with an IEP and suggested two private  
23 schools, one of which the therapist concurred, which was  
24 Bridges Academy, which is specifically tailored  
25 education to his multiple difficulties.

1           You know, it has things like a 4-to-1  
2           student-to-teacher ratio, on-site therapists, and the  
3           idea of the school is not just to give them an  
4           education, but to teach them ways to recognize what's  
5           going on with them, you know, and how to manage that so  
6           that they can be successful in the future. And it's  
7           very expensive.

8           Q           So by getting a promotion to a grade 23, which  
9           you just mentioned, that would have allowed you to send  
10          your school to Bridges Academy?

11          A           Not a 23 alone. It's about \$50,000 a year. So  
12          given the 55 percent incentive pay and the other high  
13          incentive pays for the other remote locations that  
14          Chevron has, you know, that would allow me to send him  
15          for two years of junior high and four years of high  
16          school.

17          Q           And were there other perks along with the 55  
18          percent location premium that you just mentioned if you  
19          went to Escravos?

20          A           Yeah. So some of it has been discussed  
21          earlier. There is a vacation -- you know, I had five  
22          weeks of vacation, so they pay you for that. But one of  
23          biggest things for my family and myself would have been  
24          you work 28 days and then you're home for 28 days. And  
25          I know we covered that before. But you know, with a

1 long commute, I mostly only saw my family, and I  
2 definitely only saw my son on the weekends. And so, you  
3 know, having that more or less uninterrupted time in  
4 between -- in between service trips to Nigeria was --  
5 was huge.

6 Q Let me show you another document. It's  
7 Exhibit 5.

8 MS. LEAL: And Your Honor, it has also been  
9 stipulated to admissibility.

10 THE COURT: Go ahead.

11 (Whereupon, Plaintiff's Exhibit 5 is admitted hereto.)

12 MS. KENNEDY: I'm sorry, Counsel. What exhibit  
13 number?

14 MS. LEAL: 5.

15 MS. KENNEDY: Yes, thank you. That is correct.

16 THE COURT: Okay. Go ahead.

17 BY MS. LEAL:

18 Q Have you seen this document before,  
19 Mr. Snookal?

20 A I have.

21 Q What is it?

22 A This is the physical requirements and working  
23 conditions, the GO-308, which is a description of, you  
24 know, kind of how you would be medically suitable for a  
25 job.

1 Q Okay. And if you look at the top, it says,  
2 "GO-308 category." What does that say?

3 A Office-based jobs.

4 Q And was this document, Exhibit 5, pertinent to  
5 the REM position in Escravos?

6 A Yes. This is the GO-308 that is for -- it  
7 covers that job.

8 Q So this sets forth physical and working  
9 conditions in Escravos; correct?

10 A Correct.

11 Q Down -- a little further down, it says,  
12 "Location." It does have Escravos. And then right  
13 underneath that, it has three different sections with  
14 little boxes.

15 But last box is marked, which says, "Non-Safety  
16 sensitive." Do you see that?

17 A I do.

18 Q What does that mean?

19 A "Non-safety sensitive" means that in this  
20 capacity, you cannot cause an unsafe condition to exist  
21 in the plant. In other words, you could be an office  
22 assistant; you could be a cook; you could be anything;  
23 right? Like, you're not going to have any impact on  
24 whether the plant explodes or whether the plant operates  
25 correctly. Any -- any decision that you make isn't

1 going to cause any kind of catastrophic event; right?

2 That is what is safety sensitive.

3 "Highly safety sensitive," I'm not sure exactly  
4 the way Chevron defines them, other than I know what  
5 non-safety sensitive is. The differentiation between  
6 safety sensitive and highly safety sensitive, I think,  
7 is a pilot. But I was safety sensitive in El Segundo.

8 Q So you would have been -- if this type of  
9 document, the physical requirements and working  
10 conditions form for El Segundo, were -- were before you,  
11 you're saying that the safety sensitive, first box,  
12 would be marked?

13 A That is correct.

14 Q But in Escravos, it's non-safety sensitive?

15 A That is correct.

16 Q Okay. And it also describes in first page, you  
17 now, lifting requirements or limitations. It has  
18 physical demands, 12 kilos -- I guess kilograms -- which  
19 I think is around 26-or-so pounds.

20 Is that your understanding?

21 A That sounds about right.

22 Q Okay. So you already were unable to lift more  
23 than 50 pounds, correct, based upon your diagnosis of  
24 dilated aortic root?

25 A That was a restriction put on me by Dr. Sobel,

1 yes.

2 Q Right. And we'll talk about that in a moment.

3 All right. Thank you.

4 Very quickly, let me put up Exhibit 132 on  
5 screen for you. Or you can get it on your binder?

6 A I got it.

7 MS. LEAL: And, Your Honor, this is also a  
8 document that has been stipulated to admissibility.

9 THE COURT: Go ahead.

10 (Whereupon, Plaintiff's Exhibit 132 is admitted hereto.)

11 BY MS. LEAL:

12 Q What is this document?

13 A So this is the document that explains all of  
14 the benefits and --

15 Q And did you review this document at the time  
16 that you made the application --

17 A Yes.

18 Q -- for the REM? Okay.

19 And you reviewed this in order to be able to  
20 learn the benefits of having a rotational assignment in  
21 Escravos?

22 A I did.

23 Q Thank you.

24 MS. LEAL: The next one is 20.

25 BY MS. LEAL:

1 Q You know, something I think something we need  
2 to clear up: When I asked you why you wanted to work in  
3 Escravos and you were talking about paying tuition for  
4 your son's special education, you said you wanted to be  
5 there for at least 11 years.

6 Could you, in fact, have been there for  
7 11 years, Mr. Snookal?

8 MS. KENNEDY: Objection; calls for speculation.

9 THE COURT: Overruled.

10 THE WITNESS: I do know that Escravos, like all  
11 of the other foreign locations, the governments have put  
12 limits. One of our major roles in these kinds of  
13 positions is actually to teach and mentor the, in this  
14 case, Nigerian population to eventually assume our  
15 roles.

16 That has always been -- I didn't mention it  
17 earlier. But it has been actually one of the things  
18 that I most enjoyed about being a supervisor, was  
19 mentorship. I mentored a lot of the engineers, and I  
20 mentored any own staff in -- in their jobs.

21 And so the thought of, you know, letting the  
22 Nigerians eventually take over the plant that's in their  
23 country, you know, was pretty attractive to me. I know  
24 it takes a long time. I saw it in Saudi Arabia, as  
25 well, where there was a similar arrangement.

1 MS. KENNEDY: Objection. I move to strike as  
2 nonresponsive.

3 THE COURT: Overruled. Request denied.

4 THE WITNESS: Sorry.

5 BY MS. LEAL:

6 Q So how is it that you believed that you could  
7 stay in Escravos for 11 years -- or was that your  
8 intent?

9 A Not to stay in Escravos, no. There is a  
10 typical rotation that expats do. I mean, it is  
11 well-known among the people that I know. And you go  
12 from -- it kind of depends on where you start. But you  
13 go to Nigeria. You go to Angola, and you go to  
14 Kazakhstan. I believe Nigeria and Angola -- well, I  
15 won't say because I don't know for sure.

16 Q Okay. So on the screen is Exhibit 20.

17 MS. LEAL: Again, Your Honor, this is one  
18 that's been stipulated for admissibility.

19 THE COURT: Go ahead.

20 (Whereupon, Plaintiff's Exhibit 20 is admitted hereto.)

21 BY MS. LEAL:

22 Q Before you, Mr. Snookal, is a document that  
23 says "Assignment Offer." Do you recognize this?

24 A I do.

25 Q What is this?



1 A This is the offer letter that I received after  
2 applying for the job.

3 Q And when you received this offer letter saying  
4 "you got the job," what was your reaction?

5 A I was very excited. We had actually already  
6 had to enroll my son in school, so -- you know, kind of  
7 in anticipation of getting it, hoping that it would come  
8 through, and so it did. And it meant everything to  
9 my -- to me and my family, right. Like, this -- yeah,  
10 it was going to be good.

11 Q Okay. Now, we just saw in the job description  
12 that the salary pay grade was a 23 or 24. This document  
13 says a 22. Did this concern you?

14 A It did not.

15 Q Why?

16 A Two reasons, really: One is that I've given  
17 promotions before, and I know that often people will be  
18 moved into a new job at the same pay grade that they  
19 were already in. And then they'll be reevaluated in six  
20 to 12 months and moved into the grade -- the lowest  
21 grade in the job. It's part of Chevron's total  
22 remuneration -- it's a very difficult word for me to  
23 say -- policy that jobs have a pay grade for a reason  
24 and that people should be in the correct pay grade for  
25 the job that they're in.

1 A I do.

2 Q Okay. And then on page 2 of Exhibit 24, is  
3 this your response to Ms. Smith?

4 A Yes.

5 Q And you have a number of bullet points -- or  
6 actually, she had a number of bullet points where you  
7 were answering. If you move down to the fifth bullet  
8 point.

9 A Okay.

10 Q And the question she asked was: "Advise if  
11 your new position requires you to work offshore, in  
12 field/plant, or strictly office-based." And your answer  
13 was, "Position is office-based." That was your answer  
14 at the time?

15 A That is correct.

16 Q And how did you know that this was an  
17 office-based position?

18 A As I said before, it's essentially my  
19 supervisor at the time's job, and I know what his job  
20 entails. I also know, just from the job description  
21 and -- and, like, his previous duties, that most of that  
22 job is setting strategy and future actions for the area,  
23 not so much the day-to-day, going out in the field,  
24 working on stuff; right. My boss at the time, actually,  
25 I don't remember ever seeing him in the field in that

1 position.

2 Q And you're referring to Kit Deaver?

3 A That's correct, same with Austin for the brief  
4 time that I worked with him.

5 Q Okay. And you mentioned that you were also  
6 advised that you would have to go through a medical  
7 clearance?

8 A That is correct.

9 Q And what was the first step you had to take in  
10 order to get that medical clearance?

11 A We had to fill out -- or I had to fill out an  
12 MSEA form. The first few pages of it were mine, and  
13 then I took the rest of it blank to the doctor,  
14 Dr. Sobel.

15 Q Okay. And at the time, were you concerned  
16 that, you know, having a dilated aortic root would  
17 prohibit you from going to Escravos?

18 A I was not.

19 Q Okay. So let's look at Exhibit 29.

20 MS. LEAL: Again, this is a document that's  
21 been stipulated to admissibility, Your Honor.

22 THE COURT: All right.

23 (Whereupon, Plaintiff's Exhibit 29 is admitted hereto.)

24 BY MS. LEAL:

25 Q And what is this document, Mr. Snookal?

1 write?

2 A I wrote, "Losartan and amlodipine."

3 Q Turn to the second page. The top, number 11,  
4 did you complete that, as well?

5 A I did.

6 Q And the question is: "Have you ever had any  
7 mental health or psychological issues requiring at least  
8 a medical prescription? If yes, please describe."

9 Would you read what you wrote here?

10 A I said I was treated for depression with  
11 Effexor for a few years from approximately 1994 to  
12 approximately 1996.

13 Q And that was prior to your employment with  
14 Chevron; correct?

15 A That is correct.

16 Q And between 1996 through -- and we'll learn --  
17 let me start again.

18 Are you currently taking any type of medication  
19 for depression?

20 A I am.

21 Q Okay. So between 1996 and today, when did you  
22 first start taking medication for depression?

23 A It was 2020.

24 Q Okay. Why don't we move down on same page,  
25 page two. Number 23.

1 had written on the form, anywhere that I checked "yes,"  
2 repeated some of the questions. And then they took an  
3 EKG and a fair bit of blood work.

4 Q And after you finished the examination with  
5 Dr. Sobel, what happened next?

6 A Dr. Sobel left me a voicemail message with some  
7 instructions on what to do next, including a letter to  
8 my cardiologist.

9 Q Okay. And we heard the voicemail message  
10 yesterday, so I don't think we need to cover it.

11 Now, Dr. Sobel indicated some restrictions here  
12 on the -- the second to the last page of Exhibit  
13 Number 29, that there would be no heavy lifting over 50  
14 pounds; do you see that?

15 A I do.

16 Q Okay. Prior to your examination by Dr. Sobel,  
17 was that something that Dr. Khan had also recommended  
18 you not do because of the dilated aortic root?

19 A He had just suggested that I not hold my  
20 breath. If I was doing that, then I was lifting  
21 something too heavy.

22 Q Okay.

23 A No specific amount.

24 Q Okay. So other than -- well, strike that.

25 When Dr. Khan diagnosed you with a dilated

1 aortic root back in 2014, did he prescribe any  
2 medication?

3 A The losartan and amlodipine.

4 Q So the same medication that you identified on  
5 the MSEA form?

6 A That is correct.

7 Q Okay. So other than that, were there any other  
8 restrictions imposed on you by the fact that you were  
9 being diagnosed with dilated aortic root?

10 A Um, nothing formal, no.

11 Q Okay. So let's look at Exhibit 31.

12 MS. LEAL: And again, Your Honor, this is  
13 another document that --

14 THE COURT: Yep.

15 (Whereupon, Plaintiff's Exhibit 31 is admitted hereto.)

16 BY MS. LEAL:

17 Q Okay. Before you, Mr. Snookal, is a  
18 document -- an e-mail. Have you seen this before?

19 A Yes, I have.

20 Q Okay. And what is this document?

21 A At the bottom portion is where I request a  
22 letter from Dr. Khan. And at the top portion is his  
23 answer, that he'll send me one.

24 Q Okay. Thank you. And moving on to Exhibit 33.

25 MS. LEAL: And this is another document, Your

1 we had already enrolled my son. Because of the timing,  
2 we had to, you know -- you have to commit, basically.

3 And --

4 Q So how did --

5 A Yeah.

6 Q I'm sorry.

7 So how did you pay for -- for that year where  
8 he was already enrolled inasmuch as now the job was  
9 rescinded?

10 A We ended up refinancing our house.

11 Q Okay. All right. So why did you reach out to  
12 Mr. Powers, then?

13 A Um, up to this point, I didn't think that HR  
14 had been involved. And so he's my local HR  
15 representative, right, as long as I'm in El Segundo,  
16 which I was still officially. And so I made a bit of a  
17 Hail Mary pass and hoped that HR would do a thorough  
18 investigation and might be able to change the outcome.

19 Q Okay. So is 82, the e-mail on the bottom,  
20 first page, continues on the second -- that is your  
21 complaint of discrimination to Mr. Powers?

22 A That is correct.

23 Q Okay. And top is Mr. Powers's response to you  
24 that day?

25 A That's correct.

1 Q And what was your reaction when you read his  
2 response here where he says, "I reached out to medical  
3 department, and while I'm not privy to any medical  
4 information, I understand a thorough review was  
5 conducted and alternatives were explored. We would  
6 respectfully disagree that the determination was based  
7 on stereotyping or impermissible discrimination"?

8 A I mean, I was extremely disappointed, not just  
9 from the point of view that, you know, kind of this --  
10 pretty much the end of the road and the end of my  
11 options, but also that the company that I put a lot of  
12 stock and a lot of trust in to do the right thing,  
13 right -- they'd always demonstrated that they had  
14 before -- to just tell me that "Oh, we asked the people  
15 that discriminated against you, and they said they  
16 didn't do it"; right? That's -- I mean, he only -- he  
17 took a day, I think it was -- maybe a day and a half to  
18 reply. So it just didn't make any sense to me. I don't  
19 see how you can do that.

20 Q Okay. And why did you think that it was  
21 disability discrimination?

22 A Um, so we go through a lot of training at  
23 Chevron, including on the document we looked at earlier.  
24 The HR policy 410, I think it was. Plus, I had recently  
25 had a disability discrimination -- not disability



1 MS. LEAL: So what we'll do, I think we'll  
2 start with Dr. Akintunde, and then we'll continue Mark.

3 MS. KENNEDY: Okay. And then Dr. Reading?

4 MS. LEAL: And then Dr. Reading.

5 MS. KENNEDY: And then Constance Snookal. Then  
6 I'll have Dr. -- I'll have her come in in the afternoon.

7 THE COURT: I think -- I think that's safe.

8 MS. KENNEDY: Okay.

9 THE COURT: All right. Very good. Just be  
10 mindful of -- of the time. We'll give you the total  
11 time tomorrow morning. And I had one other issue. Now  
12 I'm blanking on it. Well, I will -- I'm sure I will  
13 remember. Oh, I know.

14 Since we have attorneys coming now in the  
15 afternoon, please take your materials for the afternoon.

16 MS. KENNEDY: Oh, yes.

17 THE COURT: On the tables -- just on the  
18 tables.

19 MS. KENNEDY: Sure.

20 (Whereupon, proceeding adjourned.)

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25